Nutritional disorders

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Overview

- Multinutrient undernutrition
- Specific micronutrient deficiencies
- Obesity

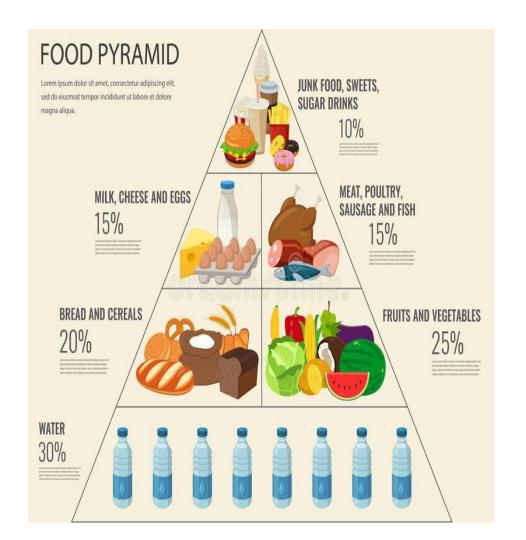
What is the calorie

The calorie is a unit of energy defined as the amount of heat needed to raise the temperature of a quantity of water by one degree Celsius (or kelvin).

In nutrition, calories refer to the energy people get from the food and drink they consume, and the energy they use in physical activity.

Essential Nutrient

- Proteins
- Fat
- Carbohydrates
- Vitamin
- Minerals
- Water



Nutritional disorders

Undernutrition, inadequate intake of one or more nutrients, Undernutrition is further subdivided into:

- Multinutrient undernutrition (growth failure in the foetus and child)
- Specific micronutrient deficiencies, (iron deficiency,, vitamin A deficiency, and iodine deficiency). Growth is not necessarily affected.

Obesity, is caused by energy intake exceeding energy expenditure over a long period leads to weight gain and excess body fat that will increase the risk of other diseases such as cardiovascular disease, hypertension and diabetes.



Multinutrient undernutrition

the body has insufficient energy and nutrients to grow or function normally.

Multinutrient undernutrition

YOUNG CHILDREN:

- 1. A foetus is deprived of nutrients due to maternal undernutrition
- 2. A young child's diet is inadequate in quantity or quality and/or infection reduces nutrient intake and absorption.

Significance (0-3 years)

- 1. In foetus, intrauterine growth retardation (<u>IUGR</u>) and a low birth weight It increases the risk of morbidity and of poorer cognitive and neurological development (++CVD,DM)
- 2. in young children impairs immunity and increases morbidity and mortality from infectious disease, Chronic undernutrition results in <u>stunting</u> (low height for age) and acute undernutrition results in <u>wasting</u> (low weight for height). <u>Underweight</u> (low weight for age) may be due to stunting and/or wasting.

Multinutrient undernutrition

Recognition

- Foetus: birth weight <10th of gestational age /<2500g
- Children:poor growth detected by
- 1. Growth chart
- Comparing a child's weight or height to a healthy reference
- Measuring mid upper arm circumference (MUAC)
 Undernutrition is mild if MUAC is <13.5 cm, moderate if <12.5 cm and severe if <11 cm

Control

- give girls and women a good diet before and during their reproductive years
- breast-feed children, exclusively until around 6 months
- give children over 6 months energy/nutrient rich complementary foods 3–5 times/day
- actively encourage young children to eat
- give prescribed micronutrient supplements
- Management of severe undernutrition requires inpatient treatment.

Severe undernutrition presents as marasmus (severe muscle and fat wasting), or kwashiorkor (bilateral pedal oedema accompanied by muscle wasting)

kwashiorkor

- · swelling of legs (oedema)
- sparse hair
- 'moon face' with little interest in surroundings
- flaky appearance of skin
 swollen abdomen
- thin muscles, but fat present



marasmus

- · normal hair
- 'old man' or wizened appearance
- thin limbs with little muscle or fat
- very underweight body





SCHOOL-AGE CHILDREN AND ADULTS

- Uncommon,(very poor)
- stunting due to **undernutrition in early life** can lead to undernutrition women of reproductive age and sometimes school-age children and old people.
- Significance: impairs immunity, reduces physical and mental activity and causes wasting.
- Recognition: best sign is wasting, which, up to puberty. <u>Body mass index</u>
 (BMI) is used for adult
- Control: improving diets ,avoiding closely spaced pregnancies ,reducing women's workloads, especially during pregnancy & controlling infection

Box 9.1: Body mass index (BMI)

BMI = weight in kilograms/height in metres² An adult is:

- severely underweight if BMI <16;</p>
- underweight if BMI <18.5;
- overweight if BMI is >25;
- obese if BMI is >30.

Ratios based on arm span instead of height are being developed for old people with kyphosis.

Specific micronutrient deficiencies

- Iron deficiency and anemia
- Vitamin A deficiency disorders
- lodine deficiency disorders (IDD)
- Zinc deficiency
- Folate deficiency

Iron deficiency & anemia

 Inadequate dietary iron results in decreased body iron stores, haemoglobin (Hb) and finally decrease Hb concentration

Causes:

- 1. Insufficient bioavailable iron in the diet to cover needs (pregnancy, infancy, puberty)
- 2. Blood loss

Significance:

Iron deficiency anaemia (IDA) leads to decreased attention spans, learning ability and work productivity. If severe, it increases mortality.

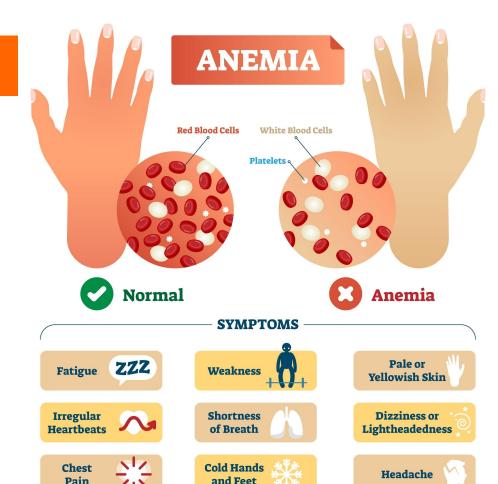
Recognition:

Anaemia is best diagnosed by measuring haemoglobin or haematocrit.

Iron deficiency & anemia

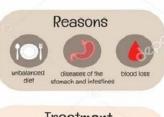
Control:

- 1. Modifying diets by:
- increasing intake of haem iron-rich foods
- increasing intake of absorption enhancers
 (e.g. vitamin C-rich fruits and vegetables)
- decreasing intake of absorption inhibitors (e.g. not drinking tea with meals);
- 1. fortifying foods.
- 2. Giving supplements of iron, often with folic acid, to priority groups (i.e. women of reproductive age particularly pregnant and postpartum women, and young children especially low birth weight infants). Where IDA is common



Anemia Symptoms, Causes, Diognose and more

web: www.labtestsguide.com | Email: info@labtestsguide.com



Treatment

Lorem Ipsum dolor sit amet, consectatuer adipiscing elit, sed diam nonummy nibh euismod tincidunt ut laoreet dolore magna aliquam erat vointpat. Ut wisi enim ad minim veniam.



ANEMIA



Symptoms







cracked lips



heartache



dry skin



nail changes

pallor



















Vitamins A deficiency (VAD)

- Vitamin A deficiency (VAD) occurs when there is insufficient vitamin A in body stores or the diet to cover needs(pregnancy ,lactation,young children)
- VAD classified as
- subclinical when serum retinol levels are <0.7Mmol/l and immunity and other physiological processes are impaired
- 2. <u>Clinical</u> (ocular sign = xerophthalmia)

Significance

 VAD makes children vulnerable to infections particularly diarrhoea and measles, and retards growth and development. Clinical VAD is the leading cause of blindness in young children.

Recognition

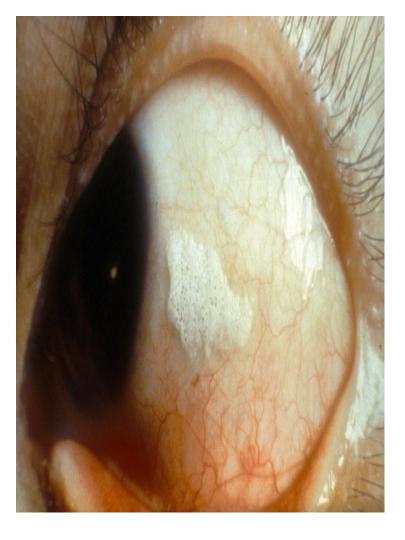
- Subclinical :can not detected
- Clinical: The presence of any sign of xerophthalmia indicates clinical VAD.

Table 9.4: Signs and symptoms of xerophthalmia. Source: McLaren & Frigg (2001)

| Sign/symptom in usual order of appearance | Description |
|---|--|
| Night blindness | Inability to see in dim light |
| Conjunctival xerosis | Conjunctiva looks dry and rough |
| Bitot's spot | Small foamy whitish lesion on conjunctiva – not always present |
| Corneal xerosis | Cornea looks dry and lacks lustre |
| Corneal ulcers | May be small or large, often deep |
| Keratomalacia | Softening of cornea which progresses rapidly and may cause corneal deformation |
| Corneal scars | Healed sequelae of corneal disease – not vitamin A specific |

Table 9.5: Schedule for oral high doses of vitamin A to prevent VAD. Source: McLaren & Frigg (2001) and personal communication

| Group | Dose in International Units (IU) |
|--|---|
| Infants < 6 months | |
| Not breast-fed | 50 000 – one dose |
| Breast-fed but mothers received no supplements | 50 000 – one dose |
| Infants 6–12 months | 100 000 every 4–6 months |
| Children >12 months | 200 000 every 4–6 months |
| Women | |
| Not lactating Lactating but not menstruating | 200 000 within 4 weeks of delivery 200 000 within 8 weeks of delivery |





Symptoms of Vitamin A Deficiency



Vision Changes



Cornia dryness



Skin changes



Kidney Stones

Retinol



DAILY NORM

† † 1-2mg



Products

Symptoms of deficiency







HAIR LOSS

DIMINISHED VISION

AMENORRHEA







ACNE

REDUCED LIBIDO

FRAGRANCE OF NAILS

CONJUNCTIVITIS

ARVI





DRYNESS OF THE SKIN

FATIGUE



FISH FAT 25000mcg(100g)



CARROT 830mcg(100g)



BUTTER 680mcg(100g)



LIVER 6500mcg(100g)



BELL PEPPER 2100mcg(100g)



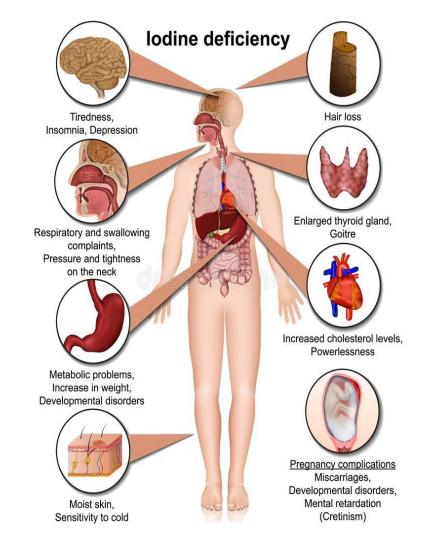
BROCCOLI 800mcg(100g)



PUMPKIN 430mcg(100g)

IODINE DEFICIENCY DISORDERS (IDD)

- <u>Iodine</u> is needed to make thyroid hormones; so prolonged iodine deficiency <u>impairs thyroid function</u> resulting in lower metabolic rate, lethargy, growth retardation and brain damage.
- Goiter occurs when the thyroid gland enlarges in an effort to capture more iodine from the blood.
- Diets in most places are low in iodine unless fortified foods



IODINE DEFICIENCY DISORDERS (IDD)

Significance

lodine deficiency is the single most common cause of mental retardation.

- in 1st and 2nd trimesters of pregnancy it causes varying degrees of irreversible damage to the developing foetal brain and nervous system
- in neonates it causes stillbirth, low birth weight and, occasionally, hypothyroid cretinism;
- in children and adults it cause goitre & hypothyroidism

Recognition

- Thyroid volume
- 2. Ultrasound
- 3. Urinary iodine

Control

- Fortifying food. Iodization of salt is by far the most effective.
- Fortifying water.
- Giving oral high doses of iodine where iodized salt is not available

Other micronutrient deficiencies

Zinc deficiency

- Zinc promotes <u>growth</u> and helps maintain a healthy <u>immune</u> system.
- Severe zinc deficiency causes growth retardation, diarrhoea, skin lesions, loss of appetite.

Zinc deficiency is **controlled** by

- Increasing the intake of foods rich in zinc (meat ,fish,poultry)
- 2. Giving zinc supplements.

Folate deficiency

Folate deficiency is a cause of <u>anaemia</u>, especially among women, and may be a risk factor in cardiovascular disease and colon cancer; it is associated with <u>neural</u> tube defects in the foetus. It is controlled by increasing intake of folate-rich foods (e.g. liver, pulses, citrus fruit and green vegetables) and giving supplements of folic acid

ZINC DEFICIENCY



Symptoms



UNEXPLAINED WEIGHT LOSS



WOUNDS THAT WON'T HEAL



OPEN SORES ON THE SKIN



DECREASED SENSE OF SMELL AND TASTE



WEAK



DIARRHEA



LOSS OF APPETITE



LEAKY GUT



THINNING HAIR. HAIR LOSS



ACNE OR RASHES



PERFORMANCE



MOOD



POOR NIGHT VISION



IMPAIRED BRAIN FUNCTIONS



HIP PAIN

Causes



INADEQUATE DIET. VEGETARIAN DIET



IN THE SOIL



GASTROINTESTINAL DISEASES



DISEASE



PREGNANCY. BREAST-FEEDING



CHRONIC LIVER DISEASE



CHRONIC KIDNEY DISEASE



ALCOHOLISM



MEDICATIONS SUCH (diuretics, antibiotics, and penicillamine)



GROWTH PERIODS IN CHILDREN

Folic acid



DAILY NORM



+ B9





Products

Symptoms of deficiency



PROBLEMS DURING PREGNANCY



MEMORY PROBLEMS



PROBLEMS WITH DIGESTION



ANEMIA



INFERTILITY



HAIR LOSS



SKIN DISEASES



INSOMNIA



FEELING OF FEAR



CORN 46mcg(100g)



HAZELNUT 68mcg(100g)



AVOCADO 89mcg(100g)



MANGO 43mcg(100g)



RED CAVIAR 50mcg(100g)



SUNFLOWER SEEDS 227mcg(100g)



PARSLEY 110mcg(100g)



OBESITY

Energy intake exceeds energy expenditure over a long period

Obesity

 Obesity is a condition in which <u>excess body fat</u> adversely affects health and increases the risk of other diseases.

Significance

In adults, obesity increases the risk of several chronic conditions including type 2 diabetes, cardiovascular diseases, gallbladder disease, osteoarthritis, back pain and some cancers. Obesity in children often leads to obesity later in life and, sometimes, psycho-social problems.

Recognition

- body mass index BMI
- . A waist circumference of >94 cm in men and >80 cm in women
- For children, a weight for height of +2 Z scores.

Obesity

Control

- eat diets <u>low in fat and high in fibre</u> (i.e. cereals, roots, legumes, fruits and vegetables),
- take regular <u>exercise</u> and avoid too much sedentary

Patient should try

- Reduce energy intake. Compliance is usually better if reduction is not more than 500 kcal/ day. Crash diets are rarely successful.
- Increase physical activity.

01 WHAT IS OBESITY

WHR WAIST HIP RATIO WAIST HIP M W 35% OVERWEIGHT OBESE

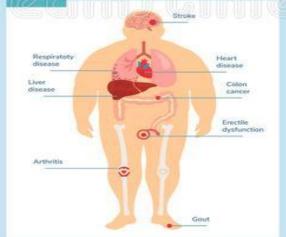
04. CAUSES OF OBESITY



OBESITY INFOGRAPHICS



05 CONSEQUENCES OF OBESITY





HOW TO LOSE WEIGHT

Obesity medical complications

